IN THE UNITED STATES PATENT AND TRADEMARK OFFICE OLIFF & BERRIDGE, PLC Attorney Docket No.: 117160 P.O. Box 19928 Alexandria, Virginia 22320 Date: September 17, 2003 Telephone: (703) 836-6400 Facsimile: (703) 836-2787 MAIL STOP PATENT APPLICATION Customer Number: 25944 NONPROVISIONAL APPLICATION TRANSMITTAL **RULE §1.53(b)** Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir: Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application HIGH-VOLTAGE ELECTRIC ROTATING MACHINE For (Title): Masahiro SEGUCHI By (Inventors): X Formal drawings (Figs. 1-20; 20 sheets) are attached. Use Figure for front page of Publication. A Declaration and Power of Attorney is filed herewith. This application claims benefit of Provisional Application No. ____ filed ____.

(A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.) X This patent application is assigned to **DENSO CORPORATION**. The executed Assignment is filed herewith. An Information Disclosure Statement is filed herewith. Entitlement to small entity status is hereby asserted. A Preliminary Amendment is filed herewith. Priority of foreign applications No. (1) 2002-270006 (2) 2003-184746 filed (1) September 17, 2002 (2) June 27, 2003 in Japan are claimed (35 U.S.C. §119).

Certified copies of the above corresponding foreign applications are filed herewith. This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing. \boxtimes The filing fee is calculated below: CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE OTHER THAN A **SMALL ENTITY SMALL ENTITY**

FOR:	NO. FILED	NO. EXTRA
BASIC FEE	* * *	
TOTAL CLAIMS	12 - 20	= *0
INDEP CLAIMS	4 - 3	= *1
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED		

^{*} If the difference is less than zero, enter "0".

FEE RATE <u>OR</u> * 375 OR 9 = \$ х OR х 42 = \$ OR 140 = \$ OR \$ TOTAL OR

RATE	FEE
* * . · *	\$ 750
x 18	\$
x 84	\$ 84
+ 280	\$
TOTAL	\$ 834

Check No. 146403 in the amount of \$834 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted.

James A. Oliff Registration No. 2

Joel S. Armstrong Registration No. 36,430